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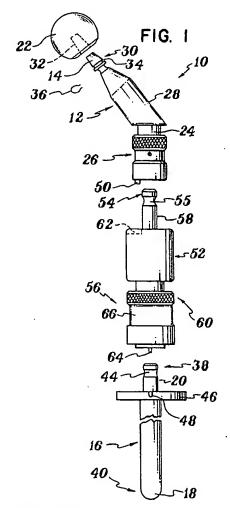
(1) Applicant: DOW CORNING WRIGHT CORPORATION
P.O. Box 100 5677 Airline Road Arlington Tennessee (US)

(72) Inventor: Richelsoph, Marc Evan 5864 Edgewater Cove, Apt. No.8 Memphis, Tennessee (US)

(4) Representative: Horton, Sophie Emma et al Elkington and Fife, Prospect House, 8 Pembroke Road Sevenoaks, Kent TN13 1XR (GB)

(54) Modular trial instrument with interlock mechanism.

According to the present invention, a modular trial instrument (10) having opposed ends for sizing of an implantable orthopedic prosthesis is provided. The instrument (10) comprises a head component (12) located at one end of the trial and having at least one connection portion (14) and a stem component (16) located at the other end of the trial defining a longitudinal axis. The stem component (16) includes a tip portion (18) and a connection portion (20) Iongitudinally opposed from the tip portion (18). The tip portion (18) of stem component (16) is received in the medullary canal of a bone. It will be apparent to those skilled in the art that the trial instrument (10) can be used for sizing an implantable orthopedic prosthesis for any limb, for example, a humerus or a femur.



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The present invention relates to a trial for sizing replacement prosthesis for a portion of a bone. More particularly, the present invention relates to a modular trial for determining the size of a replacement prosthesis for a limb of the body.

Various prostheses have been designed to replace a portion of a bone joint. Generally, a head portion is connected to an arm composed of a neck and a stem or shaft that will be embedded in the medulary canal of a bone for reconstruction. Such prostheses are often formed with an integral stem and neck portion, often a removable head element is positioned on the proximal end of the neck.

Recently modular structures fitted together from a number of replaceable parts that are available in a variety of sizes have been used. Using such prostheses, it is possible to replace either the head portion or trochanteral portion of the prostheses or both portions without removing the stem from the bone cavity. U.S. Patent Nos. 4,676,797 and 4,693,724 are illustrative of such devices.

A disadvantage of the prostheses mentioned above is they limit the surgeon's ability to simply and quickly assemble the proper prothesis components during surgery and require using the actual prosthesis components for sizing, thus risking sterility of the prosthesis components.

According to the present invention, a modular trial instrument having opposed ends for sizing of an implantable orthopedic prosthesis is provided. The instrument comprises a head component located at one end of the trial and having at least one connection portion and a stem component located at the other end of the trial defining a longitudinal axis. The stem component includes a tip portion and a connection portion longitudinally opposed from the tip portion. The tip portion of stem component is received in the medullary canal of a bone.

One advantage of the present invention is the trial preferably consists of components of various lengths and sizes that are adapted to be assembled together to form a custom trial for a prosthesis of a desired length and size. One advantage of this feature is that a trial of a desired length and size may be assembled and adapted to fit the needs of the patient during the operation.

Another advantage of the present invention is the trial can be quickly and easily assembled and disassembled without the expenditure of special forces and the use of any tools.

Another advantage of the present invention is a modular trial is provided that allows a surgeon a great deal of flexibility as to the length and size of the trial.

Another advantage of the present invention is a surgeon may easily assemble a custom trial in the operating room before the prosthesis is inserted into the patient.

Yet another advantage of the present invention is

a modular trial is provided such that individual components can be assembled and disassembled, the prosthesis need not be rotated in screwing movements or the like, allowing the trial to be easily used in confined areas.

The modular trial of the present invention thus provides the ability to assemble and disassemble a number of components to produce a custom trial prosthesis by selecting different lengths and sizes of individual components to meet the requirements of the individual patient exactly.

The invention may be better appreciated by reference to the attached drawings, which illustrate one or more preferred embodiments, wherein:

FIG. 1 is an exploded perspective view of the modular trial instrument of this invention,

FIG. 2 is a side view of the head component including the quick-disconnect,

FIG. 3 is an end view showing quick-disconnect of the head component,

FIG. 4 is a side view of the intermediate component including the the quick-disconnect with parts broken away,

FIG. 5 is an end view of the distal end of the intermediate component and the quick-disconnect,

FIG. 6 shows a cross sectional view of the quickdisconnect in conjunction with connection portion of a stem component inserted in the medullary canal of a bone.

Referring to FIG. 1, a modular trial instrument having opposed ends for sizing of an implantable orthopedic prosthesis is generally shown at 10. The trial instrument comprises a head component 12 located at one end of the trial and having at least one connection portion 14. A stem component 16 is located at the other end of the trial defining a longitudinal axis. Stem component 16 includes tip portion 18 and connection portion 20 longitudinally opposed from the tip portion. The tip portion of stem component 16 is received in the medullary canal of a bone. It will be apparent to those skilled in the art that the trial instrument can be used for sizing an implantable orthopedic prosthesis for any limb, for example, a humerus or a femur.

Referring to FIGS. 1 and 2, a preferred embodiment of the modular trial instrument for orthopedic implantation of a hip prosthesis is generally shown at 10. The instrument comprises head component 12, stem component 16 and a ball indicated at 22. Head component 12 includes shaft 24 having one end attached to a releasable interlock mechanism, such as quick-disconnect 26 and the other end attached to neck portion 28. Neck portion 28 is generally cylindrical in cross-section and tapers to a smaller diameter towards proximal 30 end. Neck portion 28 is defined along a second axis forming an obtuse angle of about 35 degrees with the longitudinal axis, allowing a surgeon to rotate head component 12 180° about the

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longitudinal axis for a medial or lateral inclination. Various obtuse angles are possible for modify the medial or lateral inclination to accommodate the needs of the particular patient. Proximal 30 end of neck portion 28 is configured with connection portion 14 for mating with taper connection portion 32. Preferably, the connection portions are of the Morse taper type. Connection portion 14 includes retaining groove 34 adapted to receive spring washer 36 for producing a friction fit as the connection portion is inserted into taper connection portion 32 of ball 22.

FIG. 3 shows end views of head portion 12 and quick-disconnect 26.

Referring to FIG. 1, stem component 16, having opposed proximal 38 and distal 40 ends, is located at the end of the trial defining a longitudinal axis. Stem 16 includes tip portion 18 and connection portion 20 longitudinally opposed from the tip portion. The tip portion is adapted to be received in the medullary canal of femur 42 as shown in FIG. 6. Various lengths of tip portion 18 are provided to correspond to the depth of the medullary canal of the femur. Connection portion 20 includes engagement groove 44 for releasably engaging quick-disconnect 26 of trial head 12. Surrounding proximal 38 end is circumferential collar 46 for facilitating proper positioning of trial stem 16 in the medullary canal of femur 42. Axial slot 48 is formed in collar 46 for mating with tab 50 on quickdisconnect 26 to prevent rotation of stem 16 with respect to head 12.

With further reference to FIG. 1 and 4, an intermediate component, generally indicated at 52, having a pair of interchangeable connection portions for mating engagement with another intermediate component and with head 12 and stem 16 components, respectively. Intermediate component 52 defining the longitudinal axis includes opposed proximal 54 and distal 56 ends. Proximal 54 end is configured with connection portion 58 including engagement groove 55 for engaging quick-disconnect 26 and distal 56 end configured with quick-disconnect 60 for engaging connection portion 20 or the connection portion of another intermediate component. Slot 62 is formed in the intermediate component for mating with tab 50 and tab 64 is provided for mating with slot 48. The tabs and slots when engaged prevent the components from rotating with respect to each other. A surgeon can selectively alter the length and size of trial by using various lengths and sizes of heads, stems and intermediate components depending on the needs of the patient.

In FIG. 4, quick-disconnect 60 is shown with parts broken away and partially cross-sectioned. All of the quick-disconnects have the same structure and are interchangeable with one another. The quick-disconnect comprises slidable sleeve 66 encircling distal 56 end of intermediate component 52, internal spring 68 or similar means for urging sleeve 66 into

the locked position, pin 70 mounted perpendicularly to the longitudinal axis of the sleeve and balls 72, 74 and 76. Pin 70 supports spring 68 and transfers the force of the spring to sleeve 66, urging it to remain in the locked position. The orientation of spring 68, pin 70 and balls 72, 74 and 76 is best viewed in FIGS. 5 and 6.

Referring to FIG. 6, the quick-disconnect for releasably engaging connection portions 20 and 58, or intermediate portion 52, as the case may be, is shown. As noted, engagement groove 44 encircles connection portion 20 near the end and is adapted to receive balls 72, 74 and 76 situated in sleeve 66. The distal inner portion of sleeve 66 is provided with a portion of enlarged inner radius 78 that allows balls 72, 74 and 76 to move radially outward when sleeve 66 is raised into the position shown. When engagement groove 44 is aligned with the balls, sleeve 66 is lowered and the balls 72, 74 and 76 are forced into the engagement groove by the sleeve to couple the quick-disconnect to connection portion 20. The quickdisconnect can easily be uncoupled from connection portion 20 by sliding sleeve 66 upward, thus allowing balls 72, 74 and 76 to move outwardly out of engagement groove 44.

Other modifications of the trial of the present invention will become apparent to those skilled in the art from an examination of the above specification and drawings. Therefore, other variations of the present invention may be made which fall within the scope of the following claims even though such variations were not specifically discussed above.

## 35 Claims

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- A modular trial instrument having opposed ends for sizing of an implantable orthopedic prosthesis, the trial comprising in combination:
  - a head component located at one end of the trial and having at least one connection portion;
  - a stem component located at the other end of the trial and defining a longitudinal axis, the stem including a tip portion and a connection portion longitudinally opposed from the tip portion, the tip portion adapted to be received in the medullary canal of a bone.
- The modular trial instrument of claim 1 further comprising at least one intermediate component having a pair of interchangeable connection portions for mating engagement with another intermediate component and with the head and the stem components, respectively.
  - The modular trial instrument of claim 1 further comprising a releasable interlock mechanism for

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rapidly coupling and uncoupling the engaged connection portions of the trial components to reflect the proper size of prosthesis for a patient.

4. A modular trial instrument having opposed ends for sizing of an implantable orthopedic prosthesis, the trial comprising in combination:

a head component located at one end of the trial and having at least one connection portion:

a stem component located at the other end of the trial and defining a longitudinal axis, the stem including a tip portion and a connection portion longitudinally opposed from the tip portion, the tip portion adapted to be received in the medullary canal of a bone;

a releasable interlock mechanism for rapidly coupling and uncoupling the engaged connection portions of the trial components to reflect the proper size of prosthesis for a patient.

- 5. The modular trial instrument of claim 4 further comprising at least one intermediate component having a pair of interchangeable connection portions for mating engagement with another intermediate component and with the head and the stem components, respectively.
- 6. The modular trial instrument of claim 4 wherein the head component includes a neck portion extending outwardly from the head component, the neck portion having a connection portion.
- 7. The modular trial instrument of claim 6 wherein the neck portion is defined along a second axis forming an obtuse angle with the longitudinal axis, the connection portion of the neck head adapter for engagement with a ball component.
- 8. A modular trial instrument having opposed ends for sizing of an implantable orthopedic femoral prosthesis, the trial comprising in combination:

a ball component;

a head component including a neck portion extending outwardly from the head component, the head located at one end of the trial, the neck component having a connection portion adapted for engaging the ball component;

a stem component located at the other end of the trial and defining a longitudinal axis, the stem including a tip portion and a connection portion longitudinally opposed from the tip portion, the tip portion adapted to be received in the medullary canal of a femur;

a releasable interlock mechanism for rapidly coupling and uncoupling the engaged connection portions of the trial components to reflect the proper size of prosthesis for a patient.

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